24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Vote!	
	C C00473918
Check if X 24-hour report 48-hour report X New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
76 Words	10 25 2016
Mailing Address 1121 5th St NW	Amount
FI 1	
City State Zip Code	4552.60
Washington DC 20001-3605	Transaction ID: VN7A7A69E58 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District: 00
Trump, Donald, J., ,	President Senate State: 00
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	other (specify) ►
Full Name of Payee 76 Words	Date of Public Distribution/Dissemination
	10 25 2016
Mailing Address 1121 5th St NW	Amount
Fl 1	
City State Zip Code	4552.61
Washington DC 20001-3605	Transaction ID: VN7A7A69E66 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Heck, Joe, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbute 2906969.49	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	9105.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
2 410	0 25 2016
Signature	